2008 SUMMER
SOFTBALL TOURNAMENT SCHEDULE

All tournaments are **ASA sanctioned** and use **ASA classifications.**
All tournaments will be held at the **Twin Lakes Sports Park** unless otherwise noted.

Submit tournament fees to the City of Bloomington Parks and Recreation office located at 401 N. Morton, Suite 250 (8 a.m. - 5 p.m. Monday through Friday), or mail to P.O. Box 848, Bloomington, IN 47402 *before* the indicated deadline.

2008 Summer Softball Tournament Schedule

TOURNAMENT	CLASS	DATE	ENTRY INFORMATION
Men's B/C B.I.T. Class B and C National Qualifier	B or Below Home Run Limit: B-6 & C-3	June 14-15	Fee: $275 Deadline: June 6
Indiana ASA State Games	Girls' Fastpitch – Class A&B	June 20-22	Fee: $325 by March 1; $350 after March 1 Deadline: June 13
	Contact: Cindy Inman, 10856 E. Gibbs Ave., Rosedale, IN 47874; Phone: 765-744-5460		
Girls' Fastpitch 10-U Class A & B State Tournament	Girls' Fastpitch – Class A & B	July 11-13	Fee: $250 Deadline: July 1
	Contact: Cindy Inman, 10856 E. Gibbs Ave., Rosedale, IN 47874; Phone: 765-744-5460		
USA/ASA Girls' Fastpitch 10U Class A National Tournament (Twin Lakes and Winslow fields)	Girls' Fastpitch _ Class A	July 29-August 3	Fee: $350 Deadline: July 22
	Contact: John Turnbull, City of Bloomington Parks and Recreation; Phone: 812-349-3712		

Softball Information/Weather Hotline: 812-349-3610 ~ www.bloomington.in.gov/parks

CITY OF BLOOMINGTON parks and recreation

For more information about softball tournaments call (812) 349-3700.

www.bloomington.in.gov/parks
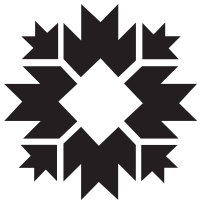
CITY OF BLOOMINGTON
parks and recreation

2008 SUMMER
SOFTBALL TOURNAMENT
OFFICIAL ENTRY FORM

Mail completed entry blank to:
Adult Sports, P.O. Box 848, Bloomington IN 47402
Phone: (812) 349-3700 ~ Fax: (812) 349-3705
www.bloomington.in.gov/parks
Please enclose or fax a copy of your ASA card if your team is ASA sanctioned.

TEAM INFORMATION

Tournament Name: _____

Team Name: _____

ASA Classification: _____ (if not ASA sanctioned, add additional $20 to entry fee and indicate sanctioning body and classification)

Manager's Name: _____

Manager's Address: _____

City/State/ZIP: _____

Home Phone: _____ Work/Cell Phone: _____

Fax: _____ E-mail: _____

PAYMENT INFORMATION

Check Enclosed ☐   Visa ☐   Mastercard ☐

Credit Card number from front of card: _____

Credit Card number from back of card: _____

Name as it appears on card: _____ Exp. Date: _____

Signature: _____